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CONFIRMATION NO. 9004

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10/520,275	11/23/2005 RULE	426	4174	10704-19 MIS:jb

APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/CA03/01076 07/16/2003
 which claims benefit of 60/396,556 07/18/2002
 and claims benefit of 60/406,320 08/28/2002

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and	/YOLANDA LYNNETTE KELLY/ Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	CANADA	0	33	2
Acknowledged							

ADDRESS

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TITLE

Scrambled egg snack food

FILING FEE RECEIVED 1680	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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